



# IRS Tax Forms

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## 1999 Individual Income Taxes: Forms, Instructions, & Publications

Note that the IRS does not revise every form every year. All major forms are revised annually, but the ones that are less frequently used, and which are not impacted by yearly tax law changes, are revised only when necessary.

Forms revised annually will have the year shown in the upper right hand corner of the form, and forms revised periodically will have their revision date shown underneath the form number in the upper left hand corner of the form.

Each listing below shows the name of the file, its file size, and its official revision date. Most all files in this section are updated yearly, and will have 1999 as the most recent revision.

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Form 2119	<b><u>Instructions for Form 2119</u></b> Sale of Your Home	81K	1997
Form 2210	<b><u>Instructions for Form 2210</u></b> Underpayment of Estimated Tax by Individuals, Estates and Trusts	41K	1999
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Form 8275-R	<b><u>Instructions for Form 8275-R</u></b> Regulation Disclosure Statement	25K	0398
Form 8283	<b><u>Instructions for Form 8283</u></b> Noncash Charitable Contributions	37K	1098
Form 8582	<b><u>Instructions for Form 8582</u></b> Passive Activity Loss Limitations	57K	1999
Form 8582-CR	<b><u>Instructions for Form 8582-CR</u></b> Passive Activity Credit Limitations	85K	1999
Form 8606	<b><u>Instructions for Form 8606</u></b> Nondeductible IRAs (Contributions, Distributions and Basis)	52K	1999
Form 8621	<b><u>Instructions for Form 8621</u></b> Interest Computation Under the Look-Back Method for Completed Long-Term Contracts	69K	0299
Form 8697	<b><u>Instructions for Form 8697</u></b> Annual Return for Partnership Withholding Tax (Section 1446) Foreign Partner's Information Statement of Section 1446 Withholding tax Partnership Withholding Tax Payment (Section	61K	0398

	1446)		
Form 8828	<b>Instructions for Form 8828</b> Recapture of Federal Mortgage Subsidy	37K	0198
Form 8829	<b>Instructions for Form 8829</b> Expenses for Business Use of Your Home	26K	1999
Form 8839	<b>Instructions for Form 8839</b> Qualified Adoption Expenses	32K	1999
Form 8853	<b>Instructions for Form 8853</b> Medical Saving Accounts & Long-Term Care Insurance Contracts	47K	1999
Form 8862	<b>Instructions for Form 8862</b> Information To Claim Earned Income Credit After Disallowance	14K	1199
Form 8866	<b>Instructions for Form 8866</b> Interest Computation Under the Look-Back Method for Property Depreciated Under the Income Forecast Method	26K	0199
Notice Number	Name of Notice	File Size	Rev. Date
<b><u>Notice 703</u></b>	Read This To See If Your Benefits May Be Taxable	15K	0999
<b><u>Notice 797</u></b>	Possible Federal Tax Refund Due to the Earned Income Credit (EIC)	17K	1299
Tax Package Number	Name of Tax Package	File Size	Rev. Date
<b><u>Tax Package 1040</u></b>	1999 Tax Package 1040	1.2M	1999
<b><u>Tax Package 1040A</u></b>	1999 Tax Package 1040A	35K	0199

[1999 Forms - Fill-In PDF Version](#) | [1999 Individual Income Tax Forms & Instructions - PDF](#)  
[1999 Business Income Tax Forms & Instructions - PDF](#) | [1999 Publications - PDF](#)  
[1999 Publications - HTML Format](#) | [1999 Administration Forms](#)  
[1999 Spanish Language Forms, Instructions & Publications](#) | [1999 Estates & Trusts](#)  
[1999 IRA Forms, Retirement Plans & Exempt Organizations](#)  
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For the year Jan. 1–Dec. 31, 1999, or other tax year beginning

1999, ending

OMB No. 1545-0074

## Label

(See instructions on page 18.)

Use the IRS label. Otherwise, please print or type.

Presidential Election Campaign (See page 18.)

LABEL HERE

Your first name and initial

Last name

If a joint return, spouse's first name and initial

Last name

Home address (number and street). If you have a P.O. box, see page 18.

Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, see page 18.

Your social security number

Spouse's social security number

**IMPORTANT!**  
You must enter your SSN(s) above.

Yes	No	Note. Checking "Yes" will not change your tax or reduce your refund.

Do you want \$3 to go to this fund? . . . . .

If a joint return, does your spouse want \$3 to go to this fund? . . . . .

## Filing Status

1 ☐ Single2 ☐ Married filing joint return (even if only one had income)3 ☐ Married filing separate return. Enter spouse's social security no. above and full name here. ▶4 ☐ Head of household (with qualifying person). (See page 18.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶5 ☐ Qualifying widow(er) with dependent child (year spouse died ▶ 19 ). (See page 18.)

## Exemptions

6a ☐ Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a. . . . .b ☐ Spouse . . . . .

c Dependents:

(1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) ☒ if qualifying child for child tax credit (see page 19)

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see page 19)
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

d Total number of exemptions claimed . . . . .

No. of boxes checked on 6a and 6b

No. of your children on 6c who:

• lived with you  
• did not live with you due to divorce or separation (see page 19)

Dependents on 6c not entered above

Add numbers entered on lines above ▶

## Income

Attach Copy B of your Forms W-2 and W-2G here. Also attach Form(s) 1099-R if tax was withheld.

If you did not get a W-2, see page 20.

Enclose, but do not staple, any payment. Also, please use Form 1040-V.

7 Wages, salaries, tips, etc. Attach Form(s) W-2 . . . . .

8a Taxable interest. Attach Schedule B if required . . . . .

b Tax-exempt interest. DO NOT include on line 8a . . . . . 8b

9 Ordinary dividends. Attach Schedule B if required . . . . .

10 Taxable refunds, credits, or offsets of state and local income taxes (see page 21) . . . . .

11 Alimony received . . . . .

12 Business income or (loss). Attach Schedule C or C-EZ . . . . .

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐

14 Other gains or (losses). Attach Form 4797 . . . . .

15a Total IRA distributions . 15a

b Taxable amount (see page 22)

16a Total pensions and annuities . 16a

b Taxable amount (see page 22)

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E

18 Farm income or (loss). Attach Schedule F . . . . .

19 Unemployment compensation . . . . .

20a Social security benefits . 20a

b Taxable amount (see page 24)

21 Other income. List type and amount (see page 24) . . . . .

22 Add the amounts in the far right column for lines 7 through 21. This is your total income ▶

## Adjusted Gross Income

23 IRA deduction (see page 26) . . . . . 23

24 Student loan interest deduction (see page 26) . . . . . 24

25 Medical savings account deduction. Attach Form 8853 . . . . . 25

26 Moving expenses. Attach Form 3903 . . . . . 26

27 One-half of self-employment tax. Attach Schedule SE . . . . . 27

28 Self-employed health insurance deduction (see page 28) . . . . . 28

29 Keogh and self-employed SEP and SIMPLE plans . . . . . 29

30 Penalty on early withdrawal of savings . . . . . 30

31a Alimony paid b Recipient's SSN ▶ . . . . . 31a

32 Add lines 23 through 31a . . . . . 32

33 Subtract line 32 from line 22. This is your adjusted gross income ▶ 33



**SCHEDULES A&B**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

**Schedule A—Itemized Deductions**

(Schedule B is on back)

▶ **Attach to Form 1040.** ▶ **See Instructions for Schedules A and B (Form 1040).**

OMB No. 1545-0074

**1999**

Attachment  
Sequence No. **07**

Name(s) shown on Form 1040

Your social security number

<b>Medical and Dental Expenses</b>	<b>Caution.</b> Do not include expenses reimbursed or paid by others.			
<b>1</b>	Medical and dental expenses (see page A-1) . . . . .	<b>1</b>		
<b>2</b>	Enter amount from Form 1040, line 34. <b>2</b>			
<b>3</b>	Multiply line 2 above by 7.5% (.075) . . . . .	<b>3</b>		
<b>4</b>	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- . . . . .		<b>4</b>	
<b>Taxes You Paid</b>	<b>5</b> State and local income taxes . . . . .	<b>5</b>		
(See page A-2.)	<b>6</b> Real estate taxes (see page A-2) . . . . .	<b>6</b>		
	<b>7</b> Personal property taxes . . . . .	<b>7</b>		
	<b>8</b> Other taxes. List type and amount ▶ . . . . .	<b>8</b>		
	<b>9</b> Add lines 5 through 8 . . . . .		<b>9</b>	
<b>Interest You Paid</b>	<b>10</b> Home mortgage interest and points reported to you on Form 1098	<b>10</b>		
(See page A-3.)	<b>11</b> Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-3 and show that person's name, identifying no., and address ▶ . . . . .			
	<b>12</b> Points not reported to you on Form 1098. See page A-3 for special rules . . . . .	<b>12</b>		
<b>Note.</b> Personal interest is not deductible.	<b>13</b> Investment interest. Attach Form 4952 if required. (See page A-3.) . . . . .	<b>13</b>		
	<b>14</b> Add lines 10 through 13 . . . . .		<b>14</b>	
<b>Gifts to Charity</b>	<b>15</b> Gifts by cash or check. If you made any gift of \$250 or more, see page A-4 . . . . .	<b>15</b>		
If you made a gift and got a benefit for it, see page A-4.	<b>16</b> Other than by cash or check. If any gift of \$250 or more, see page A-4. You <b>MUST</b> attach Form 8283 if over \$500 . . . . .	<b>16</b>		
	<b>17</b> Carryover from prior year . . . . .	<b>17</b>		
	<b>18</b> Add lines 15 through 17 . . . . .		<b>18</b>	
<b>Casualty and Theft Losses</b>	<b>19</b> Casualty or theft loss(es). Attach Form 4684. (See page A-5.) . . . . .		<b>19</b>	
<b>Job Expenses and Most Other Miscellaneous Deductions</b>	<b>20</b> Unreimbursed employee expenses—job travel, union dues, job education, etc. You <b>MUST</b> attach Form 2106 or 2106-EZ if required. (See page A-5.) ▶ . . . . .	<b>20</b>		
(See page A-5 for expenses to deduct here.)	<b>21</b> Tax preparation fees . . . . .	<b>21</b>		
	<b>22</b> Other expenses—investment, safe deposit box, etc. List type and amount ▶ . . . . .	<b>22</b>		
	<b>23</b> Add lines 20 through 22 . . . . .	<b>23</b>		
	<b>24</b> Enter amount from Form 1040, line 34. <b>24</b>	<b>24</b>		
	<b>25</b> Multiply line 24 above by 2% (.02) . . . . .	<b>25</b>		
	<b>26</b> Subtract line 25 from line 23. If line 25 is more than line 23, enter -0- . . . . .		<b>26</b>	
<b>Other Miscellaneous Deductions</b>	<b>27</b> Other—from list on page A-6. List type and amount ▶ . . . . .		<b>27</b>	
<b>Total Itemized Deductions</b>	<b>28</b> Is Form 1040, line 34, over \$126,600 (over \$63,300 if married filing separately)? <input type="checkbox"/> <b>No.</b> Your deduction is not limited. Add the amounts in the far right column for lines 4 through 27. Also, enter this amount on Form 1040, line 36. } <input type="checkbox"/> <b>Yes.</b> Your deduction may be limited. See page A-6 for the amount to enter.		<b>28</b>	



Name(s) shown on Form 1040. Do not enter name and social security number if shown on other side.

**Your social security number**

## Schedule B—Interest and Ordinary Dividends

Attachment  
Sequence No. **08**

## Part I Interest

(See page B-1 and the instructions for Form 1040, line 8a.)

**Note.** If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

**Note.** If you had over \$400 in taxable interest, you must also complete Part III.

- 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address ►

	Amount	
1		
2		
3		
4		

- 2 Add the amounts on line 1 . . . . .
- 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989 from Form 8815, line 14. You **MUST** attach Form 8815 . . . . .
- 4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a ►

## Part II Ordinary Dividends

(See page B-1 and the instructions for Form 1040, line 9.)

**Note.** If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

**Note.** If you had over \$400 in ordinary dividends, you must also complete Part III.

- 5** List name of payer. Include only ordinary dividends. If you received any capital gain distributions, see the instructions for Form 1040, line 13 ► .....

	Amount	
5		
6		

- 6** Add the amounts on line 5. Enter the total here and on Form 1040, line 9. ►

## Part III Foreign Accounts and Trusts

(See  
page B-2.)

You must complete this part if you **(a)** had over \$400 of interest or ordinary dividends; **(b)** had a foreign account; or **(c)** received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

- 7a** At any time during 1999, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing requirements for Form TD F 90-22.1 . . . . .

- 8** During 1999, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See page B-2 . . . . .

	Yes	No
1. The person is a good person.		
2. The person is a bad person.		



**SCHEDULE C-EZ  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service (99)

Name of proprietor

**Net Profit From Business**

(Sole Proprietorship)

► Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

► Attach to Form 1040 or Form 1041. ► See instructions on back.

OMB No. 1545-0074

**1999**

Attachment  
Sequence No. **09A**

Social security number (SSN)

**Part I General Information**

**You May Use  
Schedule C-EZ  
Instead of  
Schedule C  
Only If You:**

- Had business expenses of \$2,500 or less.
- Use the cash method of accounting.
- Did not have an inventory at any time during the year.
- Did not have a net loss from your business.
- Had only one business as a sole proprietor.

**And You:**

- Had no employees during the year.
- Are not required to file **Form 4562**, Depreciation and Amortization, for this business. See the instructions for Schedule C, line 13, on page C-3 to find out if you must file.
- Do not deduct expenses for business use of your home.
- Do not have prior year unallowed passive activity losses from this business.

**A** Principal business or profession, including product or service

**B** Enter code from pages C-8 & 9

**C** Business name. If no separate business name, leave blank.

**D** Employer ID number (EIN), if any

**E** Business address (including suite or room no.). Address not required if same as on Form 1040, page 1.

City, town or post office, state, and ZIP code

**Part II Figure Your Net Profit**

**1 Gross receipts. Caution:** If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see **Statutory Employees** in the instructions for Schedule C, line 1, on page C-2 and check here . . . . . ☐

**1**

**2 Total expenses.** If more than \$2,500, you **must** use Schedule C. See instructions . . . . .

**2**

**3 Net profit.** Subtract line 2 from line 1. If less than zero, you **must** use Schedule C. Enter on **Form 1040, line 12**, and **ALSO** on **Schedule SE, line 2**. (Statutory employees **do not** report this amount on Schedule SE, line 2. Estates and trusts, enter on Form 1041, line 3.) . . . . .

**3**

**Part III Information on Your Vehicle.** Complete this part **ONLY** if you are claiming car or truck expenses on line 2.

**4** When did you place your vehicle in service for business purposes? (month, day, year) ► ...../...../.....

**5** Of the total number of miles you drove your vehicle during 1999, enter the number of miles you used your vehicle for:

**a** Business ..... **b** Commuting ..... **c** Other .....

**6** Do you (or your spouse) have another vehicle available for personal use? . . . . . ☐ **Yes** ☐ **No**

**7** Was your vehicle available for use during off-duty hours? . . . . . ☐ **Yes** ☐ **No**

**8a** Do you have evidence to support your deduction? . . . . . ☐ **Yes** ☐ **No**

**b** If "Yes," is the evidence written? . . . . . ☐ **Yes** ☐ **No**

## Instructions

You may use Schedule C-EZ instead of Schedule C if you operated a business or practiced a profession as a sole proprietorship and you have met all the requirements listed in Part I of Schedule C-EZ.

### Line A

Describe the business or professional activity that provided your principal source of income reported on line 1. Give the general field or activity and the type of product or service.

### Line B

Enter the six-digit code that identifies your principal business or professional activity. See pages C-8 and C-9 for the list of codes.

### Line D

You need an employer identification number (EIN) only if you had a Keogh plan or were required to file an employment, excise, estate, trust, or alcohol, tobacco, and firearms tax return. If you need an EIN, file **Form SS-4**, Application for Employer Identification Number. If you do not have an EIN, leave line D blank. **Do not** enter your SSN.

### Line E

Enter your business address. Show a street address instead of a box number. Include the suite or room number, if any.

### Line 1

Enter gross receipts from your trade or business. Include amounts you received in your trade or business that were properly shown on **Forms 1099-MISC**. If the total amounts that were reported in box 7 of Forms 1099-MISC are more than the total you are reporting on line 1, attach a statement explaining the difference. You must show all items of taxable income actually or constructively received during the year (in cash, property, or services). Income is constructively received when it is credited to your account or set aside for you to use. Do not offset this amount by any losses.

### Line 2

Enter the total amount of all deductible business expenses you actually paid during the year. Examples of these expenses include advertising, car and truck expenses, commissions and fees, insurance, interest, legal and professional services, office expense, rent or lease expenses, repairs and maintenance, supplies, taxes, travel, the allowable percentage of business meals and entertainment, and utilities (including telephone). For details, see the instructions for Schedule C, Parts II and V, on pages C-3 through C-7. If you wish, you may use the optional worksheet below to record your expenses.

If you claim car or truck expenses, be sure to complete Part III of Schedule C-EZ.

### Optional Worksheet for Line 2 (keep a copy for your records)

<b>a</b> Business meals and entertainment . . . . .	<b>a</b>					
<b>b</b> Enter nondeductible amount included on line <b>a</b> (see the instructions for lines 24b and 24c on page C-5) . . . . .	<b>b</b>					
<b>c</b> Deductible business meals and entertainment. Subtract line <b>b</b> from line <b>a</b> . . . . .				<b>c</b>		
<b>d</b> .....				<b>d</b>		
<b>e</b> .....				<b>e</b>		
<b>f</b> .....				<b>f</b>		
<b>g</b> .....				<b>g</b>		
<b>h</b> .....				<b>h</b>		
<b>i</b> .....				<b>i</b>		
<b>j</b> <b>Total.</b> Add lines <b>c</b> through <b>i</b> . Enter here and on line 2 . . . . .				<b>j</b>		



Use  
the  
IRS  
label  
here

Your first name and initial Last name

If a joint return, spouse's first name and initial Last name

Home address (number and street). If you have a P.O. box, see page 12. Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, see page 12.

Your social security number

--	--	--	--	--	--	--	--	--	--

Spouse's social security number

--	--	--	--	--	--	--	--	--	--

▲ IMPORTANT! ▲  
You must enter  
your SSN(s) above.

**Presidential  
Election  
Campaign**  
(See page 12.)

**Note.** Checking "Yes" will not change your tax or reduce your refund.

Do you want \$3 to go to this fund? ▶

Yes ☐ No ☐

If a joint return, does your spouse want \$3 to go to this fund? ▶

Yes ☐ No ☐

**Income**

**Attach  
Copy B of  
Form(s)  
W-2 here.**  
Enclose, but  
do not staple,  
any payment.

**1** Total wages, salaries, and tips. This should be shown in box 1 of your W-2 form(s). Attach your W-2 form(s). 1

**2** Taxable interest. If the total is over \$400, you cannot use Form 1040EZ. 2

**3** Unemployment compensation, qualified state tuition program earnings, and Alaska Permanent Fund dividends (see page 14). 3

**4** Add lines 1, 2, and 3. This is your **adjusted gross income**. 4

**Note.** You must check Yes or No.

**5** Can your parents (or someone else) claim you on their return?  
**Yes.** Enter amount from worksheet ☐ **No.** If single, enter 7,050.00. If married, enter 12,700.00. See back for explanation. ☐ 5

**6** Subtract line 5 from line 4. If line 5 is larger than line 4, enter 0. This is your **taxable income**. ▶ 6

**Payments  
and tax**

**7** Enter your Federal income tax withheld from box 2 of your W-2 form(s). 7

**8a Earned income credit** (see page 15).

**b** Nontaxable earned income: enter type and amount below.

Type  \$  8a

**9** Add lines 7 and 8a. These are your **total payments**. 9

**10 Tax.** Use the amount on line 6 above to find your tax in the tax table on pages 24–28 of the booklet. Then, enter the tax from the table on this line. 10

**Refund**

Have it directly deposited! See page 20 and fill in 11b, 11c, and 11d.

**11a** If line 9 is larger than line 10, subtract line 10 from line 9. This is your **refund**. 11a

▶ **b** Routing number

▶ **c** Type:

Checking ☐

Savings ☐

**d** Account number

☐
☐


--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Amount  
you owe**

**12** If line 10 is larger than line 9, subtract line 9 from line 10. This is the **amount you owe**. See page 21 for details on how to pay. 12

I have read this return. Under penalties of perjury, I declare that to the best of my knowledge and belief, the return is true, correct, and accurately lists all amounts and sources of income I received during the tax year.

**Sign  
here** ▶

Your signature

Spouse's signature if joint return. See page 11.

Keep copy for your records.

Date

Your occupation

Date

Spouse's occupation

For  
Official  
Use  
Only

6	7	8	9	10

**Use this  
form if**

- Your filing status is single or married filing jointly.
- You (and your spouse if married) were under 65 on January 1, 2000, and not blind at the end of 1999.
- You do not claim any dependents.
- Your taxable income (line 6) is less than \$50,000.
- You do not claim a student loan interest deduction (see page 8) or an education credit.
- You had **only** wages, salaries, tips, taxable scholarship or fellowship grants, unemployment compensation, qualified state tuition program earnings, or Alaska Permanent Fund dividends, and your taxable interest was not over \$400. **But** if you earned tips, including allocated tips, that are not included in box 5 and box 7 of your W-2, you may not be able to use Form 1040EZ. See page 13. If you are planning to use Form 1040EZ for a child who received Alaska Permanent Fund dividends, see page 14.
- You did not receive any advance earned income credit payments.

If you are not sure about your filing status, see page 11. If you have questions about dependents, use TeleTax topic 354 (see page 6). If you **cannot use this form**, use TeleTax topic 352 (see page 6).

## Filling in your return

For tips on how to avoid common mistakes, see page 29.

Enter your (and your spouse's if married) social security number on the front. Because this form is read by a machine, please print your numbers inside the boxes like this:

9	8	7	6	5	4	3	2	1	0
---	---	---	---	---	---	---	---	---	---

Do not type your numbers. Do not use dollar signs.

If you received a scholarship or fellowship grant or tax-exempt interest income, such as on municipal bonds, see the booklet before filling in the form. Also, see the booklet if you received a Form 1099-INT showing Federal income tax withheld or if Federal income tax was withheld from your unemployment compensation or Alaska Permanent Fund dividends.

**Remember**, you must report all wages, salaries, and tips even if you do not get a W-2 form from your employer. You must also report all your taxable interest, including interest from banks, savings and loans, credit unions, etc., even if you do not get a Form 1099-INT.

## Worksheet for dependents who checked "Yes" on line 5

(keep a copy for  
your records)

Use this worksheet to figure the amount to enter on line 5 if someone can claim you (or your spouse if married) as a dependent, even if that person chooses not to do so. To find out if someone can claim you as a dependent, use TeleTax topic 354 (see page 6).

- |  |               |               |                    |
|--|---------------|---------------|--------------------|
| A. Amount, if any, from line 1 on front  | <u>250.00</u> | Enter total ▶ | A. <u>700.00</u>   |
| B. Minimum standard deduction . . . . .  |               |               | B. <u>700.00</u>   |
| C. Enter the LARGER of line A or line B here . . . . .   |               |               | C. <u>700.00</u>   |
| D. Maximum standard deduction. If <b>single</b> , enter 4,300.00; if <b>married</b> , enter 7,200.00 . . . . . |               |               | D. <u>7,200.00</u> |
| E. Enter the SMALLER of line C or line D here. This is your standard deduction . . . . .                       |               |               | E. <u>700.00</u>   |
| F. Exemption amount.   |               |               |                    |
| • If single, enter 0.  |               |               |                    |
| • If married and—  |               |               |                    |
| —both you and your spouse can be claimed as dependents, enter 0.   |               |               |                    |
| —only one of you can be claimed as a dependent, enter 2,750.00.  |               |               |                    |
| G. Add lines E and F. Enter the total here and on line 5 on the front . . . . .                                |               |               | G. <u>700.00</u>   |

**If you checked "No" on line 5 because no one can claim you (or your spouse if married) as a dependent, enter on line 5 the amount shown below that applies to you.**

- Single, enter 7,050.00. This is the total of your standard deduction (4,300.00) and your exemption (2,750.00).
- Married, enter 12,700.00. This is the total of your standard deduction (7,200.00), your exemption (2,750.00), and your spouse's exemption (2,750.00).

## Mailing return

Mail your return by **April 17, 2000**. Use the envelope that came with your booklet. If you do not have that envelope, see page 32 for the address to use.

**Paid preparer's use only**

**See page 21.**

Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income received during the tax year. This declaration is based on all information of which I have any knowledge.

Preparer's signature		Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
Firm's name (or yours if self-employed) and address			EIN	
			ZIP code	



**1040A****U.S. Individual Income Tax Return** (99)**1999**

IRS Use Only—Do not write or staple in this space.

OMB No. 1545-0085

**Label**

(See page 19.)

**Use the IRS label.**

Otherwise, please print or type.

LABEL HERE	Your first name and initial		Last name		Your social security number	
	If a joint return, spouse's first name and initial		Last name		Spouse's social security number	
	Home address (number and street). If you have a P.O. box, see page 20.				Apt. no.	
	City, town or post office, state, and ZIP code. If you have a foreign address, see page 20.					

**▲ IMPORTANT! ▲**You **must** enter your SSN(s) above.**Presidential Election Campaign Fund** (See page 20.)

Do you want \$3 to go to this fund?

If a joint return, does your spouse want \$3 to go to this fund?

Yes	No

**Note.** Checking "Yes" will not change your tax or reduce your refund.**Filing status**

Check only one box.

- 1 ☐ Single
- 2 ☐ Married filing joint return (even if only one had income)
- 3 ☐ Married filing separate return. Enter spouse's social security number above and full name here. ▶ \_\_\_\_\_
- 4 ☐ Head of household (with qualifying person). (See page 21.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶ \_\_\_\_\_
- 5 ☐ Qualifying widow(er) with dependent child (year spouse died ▶ 19 \_\_\_\_). (See page 22.)

**Exemptions**

- 6a ☐ Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, **do not** check box 6a.

No. of boxes checked on 6a and 6b \_\_\_\_\_

- b ☐ Spouse

**c Dependents:**

(1) First name

Last name

(2) Dependent's social security number

(3) Dependent's relationship to you

(4) ☒ if qualifying child for child tax credit (see page 23)

No. of your children on 6c who:

- lived with you
- did not live with you due to divorce or separation (see page 24)

Dependents on 6c not entered above \_\_\_\_\_

Add numbers entered on lines above

**d** Total number of exemptions claimed.**Income**

Attach Copy B of your Form(s) W-2 here. Also attach Form(s) 1099-R if tax was withheld.

If you did not get a W-2, see page 25.

Enclose, but do not staple, any payment.

**7** Wages, salaries, tips, etc. Attach Form(s) W-2.

7

**8a** Taxable interest. Attach Schedule 1 if required.

8a

**b** Tax-exempt interest. DO NOT include on line 8a.

8b

**9** Ordinary dividends. Attach Schedule 1 if required.

9

**10a** Total IRA distributions.

10a

**10b** Taxable amount (see page 25).

10b

**11a** Total pensions and annuities.

11a

**11b** Taxable amount (see page 26).

11b

**12** Unemployment compensation, qualified state tuition program earnings, and Alaska Permanent Fund dividends.

12

**13a** Social security benefits.

13a

**13b** Taxable amount (see page 28).

13b

**14** Add lines 7 through 13b (far right column). This is your **total income**.

▶ 14

**Adjusted gross income****15** IRA deduction (see page 30).

15

**16** Student loan interest deduction (see page 30).

16

**17** Add lines 15 and 16. These are your **total adjustments**.

17

**18** Subtract line 17 from line 14. This is your **adjusted gross income**.

▶ 18

**Taxable income****19** Enter the amount from line 18.

19

**20a** Check ☐ **You** were 65 or older ☐ **Blind** Enter number of boxes checked **20a** ☐

if: ☐ **Spouse** was 65 or older ☐ **Blind**

**b** If you are married filing separately and your spouse itemizes deductions, see page 32 and check here **20b** ☐

**21** Enter the **standard deduction** for your filing status. **But** see page 33 if you checked any box on line 20a or 20b **OR** if someone can claim you as a dependent.

- Single—\$4,300 • Married filing jointly or Qualifying widow(er)—\$7,200
- Head of household—\$6,350 • Married filing separately—\$3,600

**22** Subtract line 21 from line 19. If line 21 is more than line 19, enter -0-.**23** Multiply \$2,750 by the total number of exemptions claimed on line 6d.

**24** Subtract line 23 from line 22. If line 23 is more than line 22, enter -0-. This is your **taxable income**. **24**

**Tax, credits, and payments****25** Find the tax on the amount on line 24 (see page 34).

25

**26** Credit for child and dependent care expenses. Attach Schedule 2. **26**

**27** Credit for the elderly or the disabled. Attach Schedule 3. **27**

**28** Child tax credit (see page 35).

28

**29** Education credits. Attach Form 8863.

29

**30** Adoption credit. Attach Form 8839.

30

**31** Add lines 26 through 30. These are your **total credits**.

31

**32** Subtract line 31 from line 25. If line 31 is more than line 25, enter -0-.

32

**33** Advance earned income credit payments from Form(s) W-2.

33

**34** Add lines 32 and 33. This is your **total tax**.

34

**35** Total Federal income tax withheld from Forms W-2 and 1099. **35**

**36** 1999 estimated tax payments and amount applied from 1998 return. **36**

**37a** **Earned income credit.** Attach Schedule EIC if you have a qualifying child. **37a**

**b** Nontaxable earned income: amount **and type**

**38** Additional child tax credit. Attach Form 8812. **38****39** Add lines 35, 36, 37a, and 38. These are your **total payments**.

39

**Refund**

**40** If line 39 is more than line 34, subtract line 34 from line 39. This is the amount you **overpaid**. **40**

**41a** Amount of line 40 you want **refunded to you**.

41a

Have it directly deposited! See page 47 and fill in 41b, 41c, and 41d.

**b** Routing number  **c** Type: ☐ Checking ☐ Savings

**d** Account number

**42** Amount of line 40 you want **applied to your 2000 estimated tax**. **42**

42

**Amount you owe**

**43** If line 34 is more than line 39, subtract line 39 from line 34. This is the **amount you owe**. For details on how to pay, see page 48. **43**

43

**44** Estimated tax penalty (see page 48).

44

**Sign here**

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Your signature

Date

Your occupation

Daytime telephone number (optional)

Spouse's signature. If joint return, BOTH must sign.

Date

Spouse's occupation

Joint return? See page 20. Keep a copy for your records.

**Paid preparer's use only**

Preparer's signature

Date

Check if self-employed ☐

Preparer's SSN or PTIN

Firm's name (or yours if self-employed) and address

EIN

ZIP code

